

All County Plans for the Title IV-E Child Well-Being Project are expected to comply with the following requirements.

1. The County Plan, with original signatures from the Child Welfare Director and the Chief Probation Officer, must be submitted to CDSS at:

California Department of Social Services Integrated Services Unit 744 P Street, MS 8-11-86 Sacramento, CA 95814

- 2. The County Plan submissions must be received by 5:00 p.m. on August 15, 2014. An electronic copy of the County Plan should be sent to IV-EWaiver@dss.ca.gov. The County Plan with original signatures by the Child Welfare Director and the Chief Probation Officer must be received by CDSS within seven days of the electronic copy submission date. Faxes will not be accepted.
- 3. The County Plan must be an integrated plan with information and data for both Social Services and Probation Departments.
- 4. The County Plan should describe the project-wide interventions (SOP and Wraparound) as well as any optional county specific targeted interventions. Each county may identify up to two child welfare and up to two probation interventions.
- 5. The County Plan may be amended during the project period via submittal of the County Plan Amendment Form. Amendment forms may be requested at IV-EWaiver@dss.ca.gov.
- 6. The County Plan should not exceed 25 pages excluding the budget.

Title IV-E California Well-Being Project Signature Sheet County Submittal		
County Name Sacramento		
,	County Child Welfare Agency Director	
Name	Michelle Callejas	
Signature*		
Phone Number	(916) 875-0123	
Mailing Address	P.O.Box 269057, Sacramento, CA 95826-9057	
	County Chief Probation Officer	
Name	Lee Seale	
Signature*		
Phone Number	(916) 875-0312	
Mailing Address	9750 Business Park Drive, Sacramento, CA 95827	
Mail the original Signature Sheet to:		
California Department of Social Services		
Integrated Services Unit		
744 P Street, MS 8-11-86		
Sacramento, CA 95814		
*Signatures must be	in blue ink.	

Contact Information*		
	C	hild Welfare Agency
	Name	Michelle Callejas
Program	Agency	Child Protective Services
	Phone and Email	(916) 875-0123,
		CallejasM@saccounty.net
	Mailing Address	3331 Power Inn Rd. Suite 450
		Sacramento, CA 95823
	Name	Verronda Moore
Evaluation		Child Protective Services
Lvaluation	Agency Phone and Email	(916) 874-5080
	Priorie and Email	MooreV@saccounty.net
	Mailing Address	925 Del Paso Blvd., Suite 500
	Mailing Address	Sacramento, CA 95815
		Cadramento, en 35015
	Name	Mike Tateishi
Fiscal	Agency	Child Protective Services
	Phone and Email	(916) 875-1415
		TateishiMike@saccounty.net
	Mailing Address	7001-A East Parkway
		Sacramento, CA 95826
		Probation Agency
	Name	Brian Lee
Program		Probation
Fiogram	Agency Phone and Email	(916) 876-9555
	FIIOHE AND LINAN	LeeB@saccounty.net
	Mailing Address	4000 Branch Center Rd.
	Walling Address	Sacramento, CA 95827
		Casiamonto, Ort 30021
	Name	Nicole Woodman
Evaluation	Agency	Probation
	Phone and Email	(916) 876-5352
		WoodmanN@saccounty.net
	Mailing Address	9750 Business Park Drive, Suite 230
		Sacramento, CA 95827
	Name	Annie Granucci

Fiscal	Agency	Probation
	Phone and Email	(916) 875-0313
		GranucciA@saccounty.net
	Mailing Address	9750 Business Park Drive, Suite 220
		Sacramento, CA 95827
*The Program	n and Evaluation Conta	act may be the same.

Date: 8/15/2014

County: Sacramento County

TITLE IV-E CALIFORNIA WELL-BEING PROJECT PLAN

COUNTY PROFILE

Sacramento County covers 995 square miles and is home to approximately 1,418,799 people, about 400,000 of them children. There are 13 separate school districts, including the Sacramento County Office of Education (SCOE), which operates Court, Community, and special education schools for students not served by traditional districts due to incarceration, expulsion, special needs or other circumstances. Sacramento is a diverse community in terms of both income and race/ethnicity. According to the 2013 Children's Report Card: three out of five children are from a racial/ethnic minority population; there are more than 50 different languages spoken in the homes of Sacramento County students; of all Sacramento County families with children under 18, nearly one in five (17%) live in poverty; for singleparent families, one in three (30%) live in poverty. Sacramento County is a collaborative community with strong relationships across county agencies including Child Welfare and Probation as well as a diverse group of community-based providers who serve children. Sacramento's Juvenile Institutions, Programs, and Court Committee, which serves as the coordinating council for many juvenile justice initiatives, include representatives from the Courts, District Attorney, Public Defender, Probation, Sheriff, Sacramento City Police Department, Department of Health and Human Services (DHHS) Division of Child Protective Services (CPS), DHHS Division of Child and Family Mental Health (MH), DHHS Division of Alcohol and Drug Services, Juvenile Medical Services, the County Executive, the Board of Supervisors, the Juvenile Justice Delinquency Prevention Commission, SCOE, and community based organization and business partners. Sacramento's System Improvement Plan (SIP) already focuses on strategies to promote well-being. The outcome measures of timely reunification, least restrictive placement, placement stability, and permanency are consistent with the project goals. The strategies and their corresponding measures also align well with the project goals. Since the inception of the 2012 SIP, Sacramento County has made progress in the following areas: (a) Signs of Safety (SOS), a solution-focused family engagement model consistent with the CPM, has been implemented in all regions on a voluntary basis and staff receive ongoing training and coaching and continued training is provided throughout the division to support full implementation; (b) quality assurance reviews through the use of Elements of Permanency are routinely conducted to determine compliance with the practice of engaging parents/families within 15 days of a detention hearing; (c) permanency staffing model has been revised and a Delayed Permanency workgroup has been established to ensure children have a permanent plan. The leadership of Child Welfare and Probation have a strong existing partnership, and already meet regularly. Over the past two years, they have actively engaged in efforts to better serve "crossover youth" who move between the dependency and delinquency systems. Their vision, developed under a Planning Grant from the Sierra Health Foundation, was "to better meet our public safety and rehabilitative goals by ensuring our most vulnerable youth (crossover youth) achieve the behavioral and physical/mental health, academic and prosocial outcomes associated with healthy transitions to adulthood. Leaders from Probation, CPS, MH and the Courts subsequently applied for the Juvenile Justice and Child Welfare Multi-System Integration Certificate Program sponsored by the Center for Juvenile Justice Reform at Georgetown University's McCourt School of Public Policy in collaboration with the National Catholic School of Social Service at Catholic University of America. The stated purpose of the Juvenile Justice and Child Welfare Multi-Systems Integration Certificate Program is "to bring together current and future leaders to increase their

knowledge about multi-system reform efforts related to crossover youth, improve the operation of their organizations in serving this population, provide an opportunity for the development of collaborative leadership skills, and create a mutually supportive network of individuals across the county committed to system reform." The executive leaders involved in the crossover youth partnership are well represented on the new Steering Committee which has been established for the Title IV-E California Well-Being Project. The following structures will support effective planning and implementation of project initiatives: (1) steering committee – comprised of representatives from both agencies including but not limited to deputy directors, division managers/chiefs, as well as fiscal, program and continuous quality improvement managers; (2) workgroups (fiscal, program, data/evaluation, etc.) will report to the steering committee.

OTHER KEY INITIATIVES AND PILOT DEMONSTRATIONS

- (1) Residentially Based Services (RBS): Sacramento County RBS implementation began on September 16, 2010 and continues in full operation. The RBS census has been lower than initially projected. In an effort to generate referrals, the RBS referral criteria has been "relaxed" and youth who do not have a permanent connection to a family member are being considered for enrollment. As a result, the RBS providers are now offering Family Finding Services in addition to the regular array of services which are part of RBS. Although RBS census was again low in 2013, Sacramento County believes that continuing with a broad referral criteria will help to address the referral and census issues experienced by the RBS Program since its inception. The fact that all positions in the RBS Program were not filled for various periods throughout the year has resulted in services sometimes not being offered or being delayed. Additionally, when there is turnover, even after the positions are filled, staff do not immediately have the competency to perform at full capacity. It is difficult to determine the impact of not having fully functioning service teams, but it is assumed that without full and timely services, outcomes for youth and families are impacted.
- (2) Extended Foster Care (AB12): the goal of Extended Foster Care is to assist foster youth in maintaining a safety net of support while experiencing independence in a secure and supervised living environment. As of 7/25/14, there were 538 Extended Foster Care youth being served by Sacramento County CPS, the majority of them being served by the Extended Foster Care units. Due to the positive response to the program, the number of cases has increased at a higher-than-anticipated rate. As of 7/25/14, social workers in the Extended Foster Care units had an average caseload of 38.8 cases. While high caseloads strain county resources, the positive impact to participating youth is clear.
- (3) Monitoring Foster Family Agencies (FFAs): Sacramento County currently has Memoranda of Understanding (MOU) with over 30 FFAs. The MOU outlines performance goals for FFAs in the areas of safety, permanency and well-being. FFAs are required to submit an outcomes report twice each year detailing their performance in those areas. FFAs with low performance levels are required to report quarterly until performance improves. The monitoring process includes site visits and corrective action plans as needed. When necessary, Sacramento County utilizes placement holds for FFAs with poor performance levels and/or unresolved safety issues. Sacramento County works closely with Community Care licensing, sharing information and conducting joint site visits and home inspections.
- (4) Continuous Quality Improvement (CQI): Child Welfare has developed a CQI framework designed to measure the quality of services provided to children and families and the effectiveness of the processes and systems utilized to deliver those services. The famework is based on the Plan, Do,

Study, Act model and will allow the agency to identify, quantify and analyze strengths and gaps and to test, implement, learn from and revise solutions. It is a key strategy for creating a learning culture, strengthening critical thinking and improving identified outcomes.

SAFETY ORGANIZED PRACTICE (SOP) / CORE PRACTICE MODEL (CPM) (CHILD WELFARE)

Specific elements of this model include engagement, assessment, behaviorally based case planning, transition and monitoring/adapting.

Key Practice Components

Flowerte of the Model			Service Planning	Monitoring	
Elements of the Model (Tools)	Engagement	Assessment	and Implementation	and Adapting	Transition
Motivational			-		
Interviewing	X	X		X	X
Solution-Focused					
Interviewing/Practice	X	X	X	X	X
Cultural Humility	X	X	X	X	X
Appreciative Inquiry	X	X	X	Х	X
Trauma-Informed					
Practice	X	X	X	X	X
Structured Decision					
Making		X	X		X
Family/Child Teams					
and Networks of	.,	.,	.,		.,
Support	X	X	X	Х	Х
Strategies for engaging					
children, capturing the children's voice and					
perspective in decision-					
making	X	X	X	X	x
Safety	Λ	X	Λ	Λ	
Mapping/Information					
and Consultation					
Framework	X	X	Χ	X	Χ
Partnership-Based					
Collaborative Practice			X	X	X
Effective safety					
planning at foster care					
entry and exit		X	X		X
Case Teaming	X	Х	X	X	Х

WRAPAROUND (PROBATION)

Wraparound is a family-centered, strengths-based, needs-driven planning process for creating individualized services and supports for the youth and family. Specific elements of the Wraparound model will include teaming, engagement, individualized strength based case planning, and transitions.

Key Practice Components

Phase	Description
Phase 1 Engagement and Team Preparation	During this phase, the groundwork for trust and shared vision among the family and wraparound team members is established, so people are prepared to come to meetings and collaborate. During this phase, the tone is set for teamwork and team interactions that are consistent with the wraparound principles, particularly through the initial conversations about strengths, needs, and culture. In addition, this phase provides an opportunity to begin to shift the family's orientation to one in which they understand they are an integral part of the process and their preferences are prioritized. The activities of this phase should be completed relatively quickly (within 1-2 weeks if possible), so that the team can begin meeting and establish ownership of the process as quickly as possible.
Phase 2 Initial Plan Development	During this phase, team trust and mutual respect are built while the team creates an initial plan of care using a high-quality planning process that reflects the wraparound principles. In particular, youth and family should feel, during this phase, that they are heard, that the needs chosen are ones they want to work on, and that the options chosen have a reasonable chance of helping them meet these needs. This phase should be completed during one or two meetings that take place within 1-2 weeks, a rapid time frame intended to promote team cohesion and shared responsibility toward achieving the team's mission or overarching goal.
Phase 3 Implementation	During this phase, the initial wraparound plan is implemented, progress and successes are continually reviewed, and changes are made to the plan and then implemented, all while maintaining or building team cohesiveness and mutual respect. The activities of this phase are repeated until the team's mission is achieved and formal wraparound is no longer needed.
Phase 4 Transition	During this phase, plans are made for a purposeful transition out of formal wraparound to a mix of formal and natural supports in the community (and, if appropriate, to services and supports in the adult system). The focus on transition is continual during the wraparound process, and the preparation for transition is apparent even during the initial engagement activities.

INTERVENTIONS

Using the provided Interventions template, each department is to give a detailed description of the project-wide intervention as well as up to two child welfare and up to two probation optional county specific targeted interventions.

CHILD WELFARE

INTERVENTION #1

SAFETY ORGANIZED PRACTICE (SOP) / CORE PRACTICE MODEL (CPM) Is SOP / CPM a System Improvement Plan (SIP) Strategy? X Yes No The following project goals will be targeted by the intervention above: Improve the array of services and supports available to children, youth and families involved in the child welfare and juvenile probation systems Engage families through a more individualized casework approach that emphasizes family involvement Increase child safety without an over-reliance on out-of-home care Improve permanency outcomes and timelines Improve child and family well-being To decrease recidivism and delinquency for youth on probation Syear Plan All children and families receiving services from Sacramento County CPS who are involved in a referral or case due to child abuse and/or neglect. County of Sacramento County of Sacramento County of Sacramento County of Sacramento Expected short and long term outcomes The short term goal for this intervention is improved engagement with families and children in order to conduct more thorough assessments and increase youth and parental participation in case plan and safety plan development. In the long term we expect this intervention will lead to improved child safety, permanency and well-being. Services to be contracted out with the purpose/need for the contracted with the training on SOS tools and strategies which are incorporated into SOP. The current contract with Connected Families to provide training on SOS tools and strategies which are incorporated into SOP. The current contract with Connected Families to Devis Training Academy to provide SOP training and coaching from 2014 through 2019. Plan Year 1 Full implementation of SOP will begin on February 1, 2015. Therefore, our projections for 8 months of service provision during year 1 are as follows: Children = 29,635; Parents = 36,946 Plan Year 2 Children = 19,535; Parents = 36,908 Plan Year 4 Children = 29,678; Parents = 36,905		INTERVENTION #1		
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families and children in order to conduct more thorough assessments and increase youth and parental participation in case plan and safety plan development. In the long term we expect this intervention will lead to improved child safety, permanency and well-being. Services to be contracted out with the purpose/need for the contracted services and contracting timelines Projected Number of Children and Families to be Served Plan Year 1 Full implementation of SOP will begin on February 1, 2015. Therefore, our projections for 8 months of service provision during year 1 are as follows: Children = 19,535; Parents = 24,667. Plan Year 2 Plan Year 3 Children = 29,529; Parents = 36,946 Children = 29,603; Parents = 36,908	Geographic Area			
Services to be contracted out with the purpose/need for the contracted services and contracting timelines Projected Number of Children and Families to be Served Plan Year 1 Projected Number of SoP will begin on February 1, 2015. Therefore, our projections for 8 months of service provision during year 1 are as follows: Children = 29,529; Parents = 36,946 Plan Year 3 Sacramento County currently contracts with Connected Families to provide training on SOS tools and strategies which are incorporated into SOP. The current contract with UC Davis Training Academy to provide SOP training and coaching from 2014 through 2019. Full implementation of SOP will begin on February 1, 2015. Therefore, our projections for 8 months of service provision during year 1 are as follows: Children = 29,535; Parents = 36,946 Plan Year 3 Children = 29,603; Parents = 36,908	Expected short and	families and children in order to conduct more thorough assessments and increase youth and parental participation in case plan and safety plan development. In the long term we expect this intervention will lead to		
Plan Year 1 Full implementation of SOP will begin on February 1, 2015. Therefore, our projections for 8 months of service provision during year 1 are as follows: Children = 19,535; Parents = 24,667. Plan Year 2 Children = 29,529; Parents = 36,946 Plan Year 3 Children = 29,603; Parents = 36,908	contracted out with the purpose/need for the contracted services and contracting timelines	Sacramento County currently contracts with Connected Families to provide training on SOS tools and strategies which are incorporated into SOP. The current contract with Connected Families in 2015 and may be renewed at that time. There is also a concurrent contract with UC Davis Training Academy to provide SOP training and coaching from 2014 through 2019.		
projections for 8 months of service provision during year 1 are as follows: Children = 19,535; Parents = 24,667. Plan Year 2 Children = 29,529; Parents = 36,946 Plan Year 3 Children = 29,603; Parents = 36,908				
Plan Year 3 Children = 29,603; Parents = 36,908		projections for 8 months of service provision during year 1 are as follows: Children = 19,535; Parents = 24,667.		
1 Idail 1 Con C	Plan Year 2			
Plan Year 4 Children = 29,478; Parents = 36,951				
	Plan Year 4	Children = 29,478; Parents = 36,951		

Plan Year 5	Children = 29,537; Parents = 36,935	
Rollout/Implementation Activities and Timeframes		
Plan Year 1	Activities will include: defining and communicating SOP performance expectations for all staff, since strategies and tools were strongly encouraged in the past, but not mandated (3-6 months); providing overview training for staff and external stakeholders to address the similarities and small differences between current practice and new expectations (3-6 months); partnering with labor organizations so that implementation challenges are fairly addressed for all staff (1-2 years); forming a steering committee, work groups and focus groups to provide feedback loops to ensure consistent and ongoing communication between staff, management, families and other stakeholders (1-4 years); providing intensive coaching and support to increase depth and breadth in SOP for staff at all levels (1-2 years); developing evaluation plan, including mechanisms for monitoring and tracking progress (3-6 months).	
Plan Year 2	Activities will include: developing written policies and procedures regarding practice implementation and monitoring, based on feedback received from staff at all levels and external stakeholders (6-12 months); continuing exposure of the practice to external partners, which will include identified champions who can highlight the benefits of SOP (1-2 years); strengthening supervisory capacity in SOP to gain consistency and clear expectations for front line workers (6-12 months); developing a system or tools for collecting and analyzing SOP fidelity (6-12 months); partnering with labor organizations so that implementation challenges are continually addressed for all staff (1-2 years); reviewing year 1 evaluation and continuing to monitor progress (ongoing).	
Plan Year 3	Activities will include: developing a consistent message to communicate expectations and desired outcomes (ongoing); refining policies and procedures, based on feedback received from staff at all levels and external stakeholders (6-12 months); refining tools and/or process for evaluation fidelity of SOP (1-2 years); involving stakeholders and staff in finding solutions for implementation challenges (1 year); reviewing year 2 evaluation and continuing to monitor progress (ongoing).	
Plan Year 4	Activities will include: providing consistent message of expectations and desired outcomes (ongoing); monitoring SOP fidelity (ongoing); developing plan to address lack of fidelity, if needed (6-12 months); continuing training for new staff (ongoing); developing sustainability plan (12-18 months); reviewing year 3 evaluation and continuing to monitor progress (ongoing).	
Plan Year 5	Activities will include: continuing sustainability planning (ongoing); completing evaluation for year 4 (3-6 months); analyzing data and determining what to do for the next five years if the waiver continues (3-6 months).	
	Evaluation	
What tool will you be utilizing to track this measure?	Safe Measures will track the completion of SDM tools. CWS/CMS documentation reviews and Special Project Codes can track use of SOP strategies and tools.	
Will you be able to provide case level data?	X Yes □ No	

CHILD WELFARE

OPTIONAL INTERVENTION #2		
INTERVENTION: Family Finding and Kinship Support		
Is this Intervention a System Improvement Plan (SIP) Strategy?		
☐ Yes x No		
	goal (s) will be targeted by the intervention above:	
•	array of services and supports available to children, youth and in the child welfare and juvenile probation systems	
	, , ,	
X Engage familie emphasizes famil	es through a more individualized casework approach that	
•	•	
	d safety without an over-reliance on out-of-home care	
	anency outcomes and timelines	
•	and family well-being	
☐ To decrease	recidivism and delinquency for youth on probation	
Tanak Dandatian	5 Year Plan	
Target Population	This intervention will impact all children in out-of-home placement for whom a family member has not been identified.	
Geographic Area	Sacramento County	
Expected short and	In the short term, this intervention will increase the number of	
long term outcomes	children/youth achieving permanency. The long term goal is to reduce length of stays in foster care.	
How does this intervention align with the project goal?	This intervention aligns perfectly with the project goals. It will allow Sacramento County to find family members for children whose kin has not been previously indentified. Via family engagement, placement support and individualized case plans, children will have increased opportunity to achieve permanency with newly identified kin. This will lead to increased well-being of child and family, stronger family bonds, and long term decrease of reentry into foster care. Given the cost of out of home placement, per child, per year, the family finding and kin support initiative will generate savings in the short term and improve outcomes for children in the long term.	
Services to be contracted out with the purpose/need for the contracted services and contracting timelines	Sacramento County will contract with two community-based agencies to provide family finding and kinship support services. In addition, the county will also contract with an experienced evaluator to determine the success of the project.	
	d Number of Children and Families to be Served	
Plan Year 1	None	
Plan Year 2	50	
Plan Year 3	75	

Plan Year 4	100		
Plan Year 5	120		
Rollo	out/Implementation Activities and Timeframes		
Plan Year 1	Activities will include: researching evidence based practices related to family finding and kinship support and consult with other counties as needed (3-6 months); developing Request for Proposal to select service providers as well as the evaluator for the project (3-6 months); designing evaluation framework (3-6 months); developing referral criteria (1-3 months); (e) define staff roles and provide training (3-6 months); developing messaging for staff and other stakeholders (ongoing); developing policy and procedure (3-6 months); engaging labor organizations (ongoing); developing data collection, documentation and tracking plan (3-6 moths); developing administrative structure (1-3 months).		
Plan Year 2	Activities will include: beginning service provision; monitoring and tracking referrals and overall progress (ongoing); continuing training as needed (ongoing); conducting focus groups and engaging staff and providers (3-6 months).		
Plan Year 3	Activities will include: completing evaluation of year 2 (3-6 months); evaluating year 2 progress to begin identifying early successes, staff champions, promising outcomes and savings (1-3 months); obtaining feedback from families (1-3 months); continuing to train staff (ongoing); developing approach for measuring fidelity to model (3-6 months).		
Plan Year 4	Activities will include: completing evaluation of year 3 (3-6 months); evaluating outcomes and reinvestment strategies (3-6 months); making changes to target population if needed (1-2 months); formulating sustainability strategies (12-18 months); communicating success to various audiences (ongoing).		
Plan Year 5	Activities will include: sustainability planning (ongoing); completing evaluation for year 4 (3-6 months); analyzing data and deciding what to do for the next five years if the waiver continues (3-6 months).		
	Evaluation		
What tool will you be utilizing to track this measure?	Data will be collected at the provider level as well as county level. We will utilize CWS/CMS and SafeMeasures to monitor implementation, document efforts and extract data related to outcomes.		
Will you be able to provide case level data?	X Yes □ No		

CHILD WELFARE

	OPTIONAL INTERVENTION #3		
INTERVENTION: None			
Is this Interventio	Is this Intervention a System Improvement Plan (SIP) Strategy?		
□ Yes □ No			
The following project of	goal (s) will be targeted by the intervention above:		
☐ Improve the a	array of services and supports available to children, youth and		
families involved	in the child welfare and juvenile probation systems		
□ Engage famil	lies through a more individualized casework approach that		
emphasizes fami	• • • • • • • • • • • • • • • • • • • •		
•	d safety without an over-reliance on out-of-home care		
	nanency outcomes and timelines		
·	and family well-being		
•	recidivism and delinquency for youth on probation		
	5 Year Plan		
Target Population	Click here to enter text.		
Geographic Area	Click here to enter text.		
Expected short and	Click here to enter text.		
long term outcomes			
How does this	Click here to enter text.		
intervention align with			
the project goal?			
Services to be	Click here to enter text.		
contracted out with the			
purpose/need for the			
contracted services			
and contracting			
timelines	d Number of Children and Families to be Served		
Plan Year 1	Click here to enter text.		
Plan Year 2	Click here to enter text.		
Plan Year 3	Click here to enter text.		
Plan Year 4	Click here to enter text.		
Plan Year 5	Click here to enter text.		
	out/Implementation Activities and Timeframes		
Plan Year 1	Click here to enter text.		
Plan Year 2	Click here to enter text.		
Plan Year 3	Click here to enter text.		
Plan Year 4	Click here to enter text.		
Plan Year 5	Click here to enter text.		
	Evaluation		

What tool will you be utilizing to track this measure?	Click here to enter text.
Will you be able to	□ Yes
provide case level data?	□ No

INTERVENTIONS

Using the provided Interventions template, each department is to give a detailed description of the project-wide intervention as well as up to two child welfare and up to two probation optional county specific targeted interventions.

PROBATION

INTERVENTION #1

WRAPAROUND		
Is Wraparound a	System Improvement Plan (SIP) Strategy?	
□ Yes X No		
The following project goals will be targeted by the intervention above:		
 Improve the array 	of services and supports available to children, youth and	
families involved	in the child welfare and juvenile probation systems	
 Engage families t 	hrough a more individualized casework approach that	
emphasizes fami	ly involvement	
 Increase child sa 	fety without an over-reliance on out-of-home care	
 Improve permane 	ency outcomes and timelines	
 Improve child and 	d family well-being	
 To decrease reci 	divism and delinquency for youth on probation	
	5 Year Plan	
Target Population	Any youth ages 12 through 17 who is in out of home placement or is at risk	
Geographic Area	of out of home placement. Sacramento County	
Expected short and long term outcomes	The short term goal for Wraparound Services is to expand the current service eligibility criteria and capacity. This will allow Probation to better address the needs of all youth within the target population. Expected long term outcomes include reductions in out of home placement, reductions in arrests and convictions for new law violations, and reductions in related detentions/commitments to the Youth Detention Facility.	
Services to be contracted out with the purpose/need for the contracted services and contracting timelines	Existing Wraparound service providers in Sacramento County include EMQ Families First, River Oak Center for Children, Stanford Youth Solutions, and Sacramento Children's home. Wraparound Services are very intensive, child-focused and family centered, providing the following: (a) access to no-cost individual and family therapy, as needed; (b) psychiatric evaluations and medication management; (c) attendance at court dates with families, Individualized Education Plan (IEP) meetings, Student Study Team (SST) meetings, and Team Decision Making (TDM) meetings with Child Protective Services; (d) linking to community-based resources for food, clothing and shelter; (e) access to Family Partners and Youth Peer Mentors; and (f) assistance with arranging or providing transportation, for a variety of needs, including but not limited to traveling with youth to relocate to live with family, as well as medical, psychiatric, education or employment	

needs. Wraparound Services provide an effective alternative to costly residential and out of state treatment. Services are individualized and range from 24-hour crisis intervention to weekly meetings in the home setting. The community based program engages a team of professionals

Projecte	including a facilitator, social worker, probation officer, psychiatrist, therapist, and the minor's natural support system including family, friends, and teachers to support the youth's ability to remain in the home setting.
Plan Year 1	75
Plan Year 2	100
Plan Year 3	125
Plan Year 4	125
Plan Year 5	125
Plan Year 1	Develop Request for Proposals and/or renew/renegotiate existing county contracts for Wraparound Services, as needed (October 2014 - ongoing); develop referral process and expectations with Probation and Wraparound staff (October 2014 – April 2015); define administrative structure and staff roles and provide training (October 2014 – October 2015); develop messaging for staff and other stakeholders (October 2014 - ongoing); develop policies and procedures (October 2014 - ongoing); engage labor organizations (October 2014 - ongoing); engage in routine meetings between Probation and Wraparound agency to monitor program implementation and contract expenditures (October 2014 - ongoing); ensure data tracking and reporting mechanisms are put in place to support evaluation (October 2014 – October 2015).
Plan Year 2 Plan Year 3	Evaluate model adherence/fidelity and begin evaluating year 1 outcomes (October 2015 - ongoing); make program adjustments as necessary and continue staff messaging and training (October 2015 - ongoing); begin identifying staff messaging and training (October 2015 - ongoing); begin identifying staff champions, promising outcomes, and fiscal savings (October 2015 - ongoing); develop messaging regarding early successes for stakeholders (October 2015 - ongoing). Same as Year 2, plus quantify and communicate cost savings to stakeholders (October 2016 - ongoing); begin developing sustainability
Plan Year 4	strategies (October 2016 - ongoing). Same as Year 3, plus consider reinvestment strategies and pay-for-success opportunities (October 2017 – ongoing).
Plan Year 5	Same as Year 4, plus engage wide range of stakeholders and being implementing strategies to sustain programming without waiver funding (October 2018 – October 2019).
Evaluation	
What tool will you be utilizing to track this measure?	PACT risk and needs assessments will assist with on-going determinations of appropriate programming for youth based on level of risk for recidivism and identified needs. Data needed to track and evaluate outcomes will be pulled from PACT reports and Probation records and databases such as the Probation Information Program (PIP), Juvenile Referral and Arrest System (JARS), and the Booking, Intake and Classification System (BICS) and DHHS databases such as CWS/CMS.
Will you be able to	X Yes

provide case level	□ No
data?	

PROBATION

	OPTIONAL INTERVENTION #2	
INTERVENTION: Multisystemic Therapy (MST)		
Is this Intervention a System Improvement Plan (SIP) Strategy?		
☐ Yes X No		
	The following project goal (s) will be targeted by the intervention above:	
	rray of services and supports available to children, youth and	
families involved	families involved in the child welfare and juvenile probation systems	
0 0	X Engage families through a more individualized casework approach that emphasizes family involvement	
·	safety without an over-reliance on out-of-home care	
	anency outcomes and timelines	
' '	and family well-being	
•	,	
A TO decrease f	ecidivism and delinquency for youth on probation 5 Year Plan	
Target Population	Youth ages 12 through 17 with conditions including conduct disorders, mood disorders, anxiety disorders, adjustment disorders, and factors "pulling" youth out of their homes (i.e. gangs, prostitution, runaway issues, etc.). Target youth have elevated need scores in any one of the following domains on the PACT: Current Relationships, Attitudes/Behaviors, Mental Health, or Family Dynamics.	
Geographic Area	Sacramento County	
Expected short and long term outcomes	Expected short term outcomes include the following: (a) percent of cases at discharge with parenting skills necessary to handle future problems, (b) percent with improved family relations, (c) percent with improved network of supports, (d) percent with success in educational/vocational settings, (e) percent involved with pro-social peers/activities, and (f) percent of youth able to remain in their homes. Expected long term outcomes include reductions in arrests and convictions for new law violations and reduced detention/commitments in the Youth Detention Facility.	
How does this intervention align with the project goal?	The MST treatment model aligns perfectly with the project goals. Proven effective with chronically delinquent and violent juveniles across many clinical trials, MST is a family and home-based treatment that strives to change how youth function in their natural settings—home, school, and neighborhood—in ways that promote positive social behavior. MST focuses on improving a family's capacity to overcome the known causes of delinquency, introduces youth to pro-social peers and activities, and promotes the parents' ability to monitor and discipline their children. MST assists children at-risk of out of home placement to remain in the home and function more effectively in their community. MST is an evidence based intervention recognized as a Model Program by the Blueprints for Violence Prevention and has been found by the Washington State Institute of Public Policy to create substantial cost-savings which far outweigh the program cost.	
Services to be contracted out with the	Probation currently contracts with River Oak (which has been operating in Sacramento for over 40 years) and has the ability to easily renew/expand its contract as needed through June 2015, at which time a new contract will	

purpose/need for the contracted services and contracting timelines	need to be entered into. No contracting delays are anticipated due to the long-standing nature of this contract. River Oak Center for Children (River Oak) is the only locally certified provider of MST. In March 2009, River Oak's MST team was the only juvenile program in the State of California awarded the California Council on Mentally III Offenders (COMIO) 2009 Best practice award. Therapists have small caseloads of four to six families; work as a team; are available 24 hours a day, 7 days a week; and provide services at times convenient to the family. MST therapists concentrate on empowering parents and improving their effectiveness. Specific treatment techniques used to facilitate these gains are integrated from those therapies that have the most empirical support, including behavioral, cognitive-behavioral, and pragmatic family therapies. This family-therapist collaboration allows the family to take the lead in setting treatment goals.
Projecte	d Number of Children and Families to be Served
Plan Year 1	35
Plan Year 2	50
Plan Year 3	65
Plan Year 4	65
Plan Year 5	65
Rollo	out/Implementation Activities and Timeframes
Plan Year 1	Renew/renegotiate contract with River Oak for MST as needed (October
	2014 - ongoing); review referral process and expectations with Probation
	and River Oak staff (October 2014 – April 2015); update any policies and procedures after a meet and confer with union, as necessary (October
	2014 - ongoing); engage in routine meetings with Probation and River Oak
	to monitor program implementation and contract expenditures and adjust
	as necessary (October 2014 - ongoing); ensure data tracking and reporting
	mechanisms are in place to support evaluation (October 2014 – October 2015).
Plan Year 2	Evaluate model adherence/fidelity and begin evaluating year 1 outcomes
3.1 1 03.1 2	(October 2015 - ongoing); make program adjustments as necessary and
	continue staff messaging and training (October 2015 - ongoing); begin
	identifying staff champions, promising outcomes, and fiscal savings (October 2015 - ongoing); develop messaging regarding early successes
	for stakeholders (October 2015 - ongoing).
Plan Year 3	Same as Year 2, plus quantify and communicate cost savings to
	stakeholders (October 2016 - ongoing); begin developing sustainability
Dian Voor 4	strategies (October 2016 - ongoing). Same as Year 3, plus consider reinvestment strategies and pay-for-
Plan Year 4	success opportunities (October 2017 – ongoing).
Plan Year 5	Same as Year 4, plus engage wide range of stakeholders and begin
	implementing strategies to sustain programming with and without waiver
	funding (October 2018 – October 2019). Evaluation
What tool will you bo	PACT risk and needs assessments will assist with on-going determinations
What tool will you be	of appropriate programming for youth based on level of risk for recidivism
	11 1 23 2 3 2 7 2 2 2 2 2 2 2 2 2 2 2 2 2 2

utilizing to track this measure?	and identified needs. Data needed to track and evaluate outcomes will be pulled from PACT reports and Probation databases such as the Probation Information Program (PIP), Juvenile Arrest and Referral System (JARS), and the Booking, Intake and Classification System (BICS) and DHHS databases such as CWS/CMS. River Oak will supply the short-term outcome information via its MST Program Implementation Reviews. River Oak has internal fidelity and quality assurance measures in place in connection with routine data submissions to its parent organization, MST Services, Inc.
Will you be able to provide case level data?	X Yes □ No

PROBATION

OPTIONAL INTERVENTION #3

W. 1755	OPTIONAL INTERVENTION #3	
INTERVENTION: Functional Family Therapy (FFT)		
	Is this Intervention a System Improvement Plan (SIP) Strategy?	
☐ Yes X No		
	goal (s) will be targeted by the intervention above:	
•	rray of services and supports available to children, youth and	
families involved	in the child welfare and juvenile probation systems	
X Engage familie	es through a more individualized casework approach that	
emphasizes family involvement		
X Increase child	safety without an over-reliance on out-of-home care	
X Improve perm	anency outcomes and timelines	
X Improve child	and family well-being	
X To decrease r	ecidivism and delinquency for youth on probation	
	5 Year Plan	
Target Population	Youth ages 11 through 17 who have elevated need scores in any one of the following domains on the PACT: Current Relationships, Attitudes/Behaviors, Mental Health, or Family Dynamics; and have factors "pushing" them out of their homes (i.e. parents, siblings or other family members, etc.). The target population may include youth with: (a) antisocial attitudes, values and beliefs; (b) impulsive behavior with poor problem solving skills; (c) anti-social peer groups; (d) criminality in the family; (e) siblings in the home; or (g) inconsistent or abusive parenting.	
Geographic Area	Sacramento County	
Expected short and long term outcomes	Expected short term outcomes include: increases in youth exhibiting desired changes in thinking and behaviors and the number of youth able to remain in their homes. Expected long term outcomes include reductions in arrests and convictions for new law violations and reduced detentions/commitments in the Youth Detention Facility.	
How does this intervention align with the project goal?	FFT aligns perfectly with the project goal. The FFT model has been successfully replicated in juvenile justice, mental health, and child welfare settings. FFT has 3 phases with specific areas of assessment, therapeutic goals, and therapist skills that, when followed with fidelity and competence increase dramatically the likelihood of successful outcomes with clients. The Engagement Phase focuses on decreasing the intense negativity often characteristic of high-risk families. The Behavior Change Phase aims to reduce and eliminate problem behaviors through interventions such as skill training in family communication, parenting, problem-solving, and conflict management. The Generalization Phase aims to increase the family's capacity to use skills learned and community resources to help prevent relapse. FFT is an evidence based intervention recognized as a Model Program by the Blueprints for Violence Prevention and has been found by the Washington State Institute of Public Policy to create substantial cost-savings which far outweigh the program cost.	
Services to be contracted out with the	Probation has been contracting with Stanford Youth Solutions, a well- established local community based organization, to provide Functional Family Therapy for over 7 years. The current contract with Stanford Youth	

purpose/need for the contracted services and contracting timelines	Solutions ends June 2015, at which time a new contract will need to be entered into. No contracting delays are anticipated due to the long-term nature of this contract. FFT is a short-term, high intensity therapeutic intervention program designed to work with at-risk youth and their families. With an average of 12 sessions (in home or at a clinic) spread out over a 3-4 month period, FFT uses a strength-based treatment modality to promote protective factors associated with delinquent behaviors. FFT also helps empower those involved to look at how their actions impact themselves and those around them.
Projecte	ed Number of Children and Families to be Served
Plan Year 1	60
Plan Year 2	80
Plan Year 3	100
Plan Year 4	100
Plan Year 5	100
Rollo	out/Implementation Activities and Timeframes
Plan Year 1	Renew/renegotiate contract with Stanford Youth Solutions for FFT as needed (October 2014 -ongoing); review referral process and expectations with Probation and Stanford Youth Solutions staff (October 2014 – April 2015); update any policies and procedures after a meet and confer with the union, as necessary (October 2014 - ongoing); engage in routine meetings between Probation and Stanford Youth Solutions to monitor program implementation and contract expenditures and adjust as necessary (October 2014 - ongoing); ensure data tracking and reporting mechanisms are in place to support evaluation (October 2014 – October 2015).
Plan Year 2 Plan Year 3	Evaluate model adherence/fidelity and begin evaluating year 1 outcomes (October 2015 - ongoing); Make program adjustments as necessary and continue staff messaging and training (October 2015 - ongoing); begin identifying staff champions, promising outcomes, and fiscal savings (October 2015 - ongoing); develop messaging regarding early successes for stakeholders (October 2015 - ongoing). Same as Year 2, plus quantify and communicate cost savings to stakeholders (October 2016 - ongoing); begin developing sustainability
	strategies (October 2016 - ongoing).
Plan Year 4	Same as Year 3, plus consider reinvestment strategies and pay-for- success opportunities (October 2017 – ongoing).
Plan Year 5	Same as Year 4, plus engage wide range of stakeholders and begin implementing strategies to sustain programming with and without waiver funding (October 2018 – October 2019).
	Evaluation
What tool will you be utilizing to track this measure?	PACT risk and needs assessments will assist with on-going determinations of appropriate programming for youth based on level of risk for recidivism and identified needs. Data needed to track and evaluate outcomes will be pulled from PACT reports and Probation databases such as the Probation Information Program (PIP), Juvenile Arrest and Referral System (JARS), and the Booking, Intake and Classification System (BICS) and DHHS databases such as CWS/CMS. Changes in thinking and behavior will be measured at the beginning and end of treatment using the Youth Outcome

	Questionnaire (Y-OQ), Youth Outcome Questionnaire Self-Report (Y-OQ-SR), and How I Think (HIT) Questionnaire. Stanford Youth Solutions has internal fidelity and quality assurance measures in place in connection with routine data submissions to its parent organization, Functional Family Therapy, LLC.
Will you be able to	X Yes
provide case level data?	□ No

PLANNING PROCESS AND COMMUNITY SUPPORT

Through the C-CFSR Sacramento county obtained input from stakeholders including but not limited to: service providers, child welfare social workers, judicial officers, probation officers, probation youth, parents and caregivers. This input, in conjunction with outcomes data, pointed to the need for further work in the areas of safety, permanency and well-being. Permanency in particular was identified as primary need for both Probation and Child Welfare. Consequently, the initiatives included in this plan are designed to address it. In terms of engaging key partners in planning and implementation efforts, both Child Welfare and Probation plan to conduct stakeholder outreach activities which may include, but not be limited to: focus groups, joint trainings and data/outcomes sharing. In fact, Child Welfare recently provided SOS/SOP training to community partners including representatives from Foster Family Agencies, substance abuse service providers, health care providers, youth and family advocates and family resource centers. Both Probation and Child Welfare plan to include family and youth voice in project planning and implementation efforts.

SYSTEM CAPACITY DEVELOPMENT

Non-waiver funds will be used to provide coaching to CPS staff on SOP and for evaluation services. Sacramento County will also contract with community-based providers to provide family finding and kinship support services. Child Welfare and Probation anticipate the need for a more integrated data collection and reporting system in order to monitor both process and outcomes measures. Leadership is considering utilizing a shared staff position to coordinate the data tracking and reporting function. In addition, Sacramento's Title IV-E Well-Being Project Steering Committee will appoint a Data and Evaluation Subcommittee, with representatives from both Child Welfare and Probation, to examine IT needs, including documentation and data entry, and make appropriate recommendations.

BUDGET

The deadline to submit a budget for the demonstration project was extended until August 22, 2014.

PROJECT PHASE DOWN

Sacramento County is committed to the safety, permanency and well-being of families, children and youth served by Child Welfare and Probation. Accordingly, Sacramento would not terminate any of these initiatives without first considering the continued well-being of the population served. To develop a sound sustainability plan, Sacramento's Title IV-E Well-Being Project Steering Committee will designate a Sustainability Subcommittee during the first project year in order to: identify alternative sources of funding; leverage existing contracts, services and resources; recommend organizational and programmatic shifts needed to continue provision of services; and develop/implement a sustainability work plan. The sustainability work plan will include a contingency process for assessing the needs of families, children and youth and linking them to appropriate community-based services, in the event sustainability efforts are not successful.